

As the below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:

INTUBATING LARYNGEAL MASK

the specification of which

[] is attached hereto.

[x] was filed on July 25, 1997 as

Application Serial No. 08/901,055

and was amended on _____
(if applicable)

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, §1.56(a).

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

(Serial No.)

(Filing Date)

(Status)

(Serial No.)

(Filing Date)

(Status)

POWER OF ATTORNEY: As the named inventor, I hereby appoint the following attorneys to prosecute this application and transact all business in the Patent and Trademark Office connected therewith:

Roy C. Hopgood, Reg. No. 15,245; John M. Calimafde, Reg. No. 16,895; Eugene J. Kalil, Reg. No. 16,686; Marvin N. Gordon, Reg. No. 23,094; Stephen B. Judlowe, Reg. No. 21,049; James M. Rhodes, Jr., Reg. No. 25,229; Francis J. Murphy, Reg. No. 24,537; Dennis J. Mondolino, Reg. No. 27,148; William G. Todd, Reg. No. 28,480; Ira B. Winkler, Reg. No. 29,223; and James M. Bollinger, Reg. No. 32,555; Porter J. Fleming, Reg. No. 31,759; Brian P. Murphy, Reg. No. 34,986; and Janet B. Linn.

SEND CORRESPONDENCE TO:

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EXPRESS MAIL LABEL NO. EV225207474US

(continued on next page)

DATE OF DEPOSIT September 26, 2003

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of sole inventor Archibald Ian Jeremy BRAIN

Inventor's signature Archibald Ian Jeremy Brain Dated 22nd DEC 1997

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Citizenship GREAT BRITAIN

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Assistant Commissioner of Patents
Washington, D.C. 20231

**POWER OF ATTORNEY BY INVENTOR
(REVOCATION OR PRIOR POWERS)**

As a named inventor for all the applications identified in the table below:

Application Number	Art Unit	Filing Date	Examiner	Title
08/901,055	3761	July 25, 1997	Lewis, A.	Intubating Laryngeal Mask
08/964,664	3761	November 5, 1998	Lewis, A.	Endotracheal Tube Construction
60/128,469	Unassigned	April 9, 1999	Unassigned	Laryngeal Mask Airway with Geotric-Drainage Feature
09/299,319	3733	April 9, 1999	Unknown	Laryngeal Mask Airway Device
09/412,954	Unknown	October 5, 1999	Unknown	Laryngeal Mask Airway Device

REVOCATION OF PRIOR POWERS OF ATTORNEY

I hereby revoke all powers of attorney previously given and

NEW POWER OF ATTORNEY

I hereby appoint the following attorneys to prosecute and transact all business in the Patent and Trademark Office connected therewith.

Michael J. Bevilacqua	Reg. No. 31,091
James B. Lampert	Reg. No. 24,564
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EXPRESS MAIL LABEL NO. EV225207474US
DATE OF DEPOSIT September 26, 2003

Date: 18 NOV 1999

Archibald I. I. Brain

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(Signature)

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